


EXHIBIT C

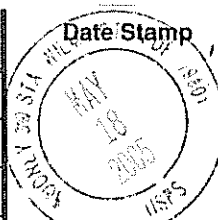
Completed by the office of origin. (A remplir par le bureau d'origine.)	Item Description (Nature de l'envoi)	Registered <input type="checkbox"/> Article (Envoi recommandé)	Letter <input type="checkbox"/> (Lettre)	Printed Matter <input type="checkbox"/> (Imprimé)	Other <input type="checkbox"/> (Autre)	Recorded Delivery <input type="checkbox"/> (Envoi à livraison attestée)	Express <input type="checkbox"/> Mail International
	<input type="checkbox"/> Insured Parcel (Colis avec valeur déclarée)	Insured Value (Valeur déclarée)			Article Number		
	Office of Mailing (Bureau de dépôt) Rohner Square					Date of Posting (Date de dépôt)	
	Addressee Name or Firm (Nom ou raison sociale du destinataire) Tatung Company						
Completed at destination. (A compléter à destination.)	Street and No. (Rue et No.) 22 Chungshan Rd.						
	Place and Country (Localité et pays) 10451 Taipei, Taiwan						
	This receipt must be signed by: (1) the addressee; or, (2) a person authorized to sign under the regulations of the country of destination; or, (3) if those regulations so provide, by the employee of the office of destination. This signed form will be returned to the sender by the first mail. (Cet avis doit être signé par le destinataire ou par une personne y autorisée en vertu des règlements du pays de destination, ou, si ces règlements le comportent, par l'agent du bureau de destination, et renvoyé par le premier courrier directement à l'expéditeur.)						
	<input type="checkbox"/> The article mentioned above was duly delivered. (L'envoi mentionné ci-dessus a été dûment livré.)					Date	
	Signature of Addressee (Signature du destinataire)			Office of Destination Employee Signature (Signature de l'agent du bureau de destination)			

PS Form 2865, February 1997 (Reverse)

Registered No.

RR 366 000 534 US

To Be Completed By Post Office	Reg Fee \$	7.25	Special \$	
	Handling \$		Delivery \$	
	Charge		Return \$	1.75
	Postage \$	6.05	Restricted \$	
Received by				
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	Customer Must Declare Full Value \$		<input type="checkbox"/> With Postal Insurance <input type="checkbox"/> Without Postal Insurance	
	FROM	Richard Kirk/The Bayard Firm 31066-2		
		222 Delaware Ave., P.O. Nox 25130		
		Wilmington, DE 19899 U.S.A.		
	TO	Tatung Company		
	22 Chungshan N Road, Section 3			
	10451 Taipei, Taiwan			



Domestic Insurance
Is Limited To
\$25,000; International
Indemnity Is Limited
(See Reverse)

PS Form 3806,
February 1995

Receipt for Registered Mail (Customer Copy)
(See Information on Reverse)